MULTIPLE DEPENDENT CLAIM SERIAL NO. FILING DATE FEE CALCULATION SHEET 10 | 550435 APPLICANTIST (FOR USE WITH FORM PTO-875) **CLAIMS** AFTER AFTER AS FILED AFTER I"AMENDMENT AS FILED. 2 MAMENDMENT AFTER .I"AMENDMENT 2 MAMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. 22 TOTAL IND TOTALIND TOTAL DEP TOTAL DEP **∳**a TOTAL TOTAL CLAIMS CLAIMS

PTO - 1360 (REV. 11/04)

U.S. DEPARTMENT of COMMERCE